

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	59667	5/7/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	0/8	
2	✓	0/8	
3	✓	0/8	
4	✓	0/8	
5	✓	0/8	
6	✓	0/8	
7	✓	0/8	
8	✓	0/8	
9	✓	0/8	
10	✓	0/8	
11	✓	0/8	
12	✓	0/8	
13	✓	0/8	
14	✓	0/8	
15	✓	0/8	
16	✓	0/8	
17	✓	0/8	
18	✓	0/8	
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20	✓	0/8	
21	✓	0/8	
22	✓	0/8	
23	✓	0/8	
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26	✓	0/8	
27	✓	0/8	
28	✓	0/8	
29	✓	0/8	
30	✓	0/8	
31	✓	0/8	
32	✓	0/8	
33	✓	0/8	
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45	✓	0/8	
46	✓	0/8	
47	✓	0/8	
48	✓	0/8	
49	✓	0/8	
50	✓	0/8	

Claim	Final	Original	Date
51	✓	0/8	
52	✓	0/8	
53	✓	0/8	
54	✓	0/8	
55	✓	0/8	
56	✓	0/8	
57	✓	0/8	
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93	✓	0/8	
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95	✓	0/8	
96	✓	0/8	
97	✓	0/8	
98	✓	0/8	
99	✓	0/8	
100	✓	0/8	

Claim	Final	Original	Date
101	✓	0/8	
102	✓	0/8	
103	✓	0/8	
104	✓	0/8	
105	✓	0/8	
106	✓	0/8	
107	✓	0/8	
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142	✓	0/8	
143	✓	0/8	
144	✓	0/8	
145	✓	0/8	
146	✓	0/8	
147	✓	0/8	
148	✓	0/8	
149	✓	0/8	
150	✓	0/8	

If more than 150 claims or 10 actions
staple additional sheet here